

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA		FOR COURT USE ONLY DUE DATE:	
TRANSCRIPT DESIGNATION AND ORDERING FORM			
1. NAME Jaime W. Marquart		2. PHONE NUMBER (424) 652-7800	
4. FIRM NAME: Baker Marquart		5. E-MAIL ADDRESS: jmarquart@bakermarquart.com	
6. MAILING ADDRESS 10990 Wilshire Blvd., 4th Floor		7. CITY Los Angeles	
8. STATE CA		9. ZIP CODE 90024	
10. CASE NUMBER 2:12-cv-06921-GW-JC		11. CASE NAME Fox Television Stations Inc et al v. BarryDriller Content Systems	
13. APPEAL CASE NUMBER 12-2786		14. ORDER FOR <input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> NON-APPEAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> AUSA <input type="checkbox"/> FPD <input type="checkbox"/> OTHER	
15. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested) Attach additional page for designations if necessary.			
HEARING DATE	COURT REPORTER	PROCEEDINGS	
9/13/2012	Pat Cuneo	<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input checked="" type="checkbox"/> (PLEASE SPECIFY): Hearing re Expedited Discovery	
11/8/2012	Wil Wilcox	<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input checked="" type="checkbox"/> (PLEASE SPECIFY): Scheduling Conference	
12/27/2012	Wil Wilcox	<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input checked="" type="checkbox"/> (PLEASE SPECIFY): Preliminary Injunction Hearing Cont'd	
		<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input type="checkbox"/> (PLEASE SPECIFY):	
		<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input type="checkbox"/> (PLEASE SPECIFY):	
16. ORDER: IF ORDERING BOTH PAPER AND ELECTRONIC COPIES, THERE WILL BE AN ADDITIONAL CHARGE.			
CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FORMAT	
ORDINARY	<input type="checkbox"/>	PAPER COPY	<input type="checkbox"/>
14 DAYS	<input type="checkbox"/>	PDF FORMAT	<input checked="" type="checkbox"/>
7 DAYS	<input checked="" type="checkbox"/>	ASCII FORMAT	<input checked="" type="checkbox"/>
DAILY	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
HOURLY	<input type="checkbox"/>	FOR ADDITIONAL COPIES, CONTACT COURT REPORTER OR TRANSCRIPTION AGENCY	
REAL TIME	<input type="checkbox"/>	19. Transcription agency for digitally recorded proceedings:	
(CERTIFICATION 17 & 18) By signing the below, I certify that I will pay all charges (deposit plus additional).		20. Month: _____ Day: _____ Year: _____ Transcript payment arrangements were made with:	
17. DATE: January 7, 2013		NAME OF OFFICIAL: _____ Payment of estimated transcript fees were sent on the following date: Month: _____ Day: _____ Year: _____	
18. SIGNATURE: /s/ Jaime W. Marquart			